

Fill in this information to identify your case:

|   |                             |             |           |
|---|-----------------------------|-------------|-----------|
| Debtor 1                                | <b>Garett W. Eackelbary</b> |             |           |
|   | First Name                  | Middle Name | Last Name |
| Debtor 2<br>(Spouse if, filing)         | First Name                  | Middle Name | Last Name |
| United States Bankruptcy Court for the: | NORTHERN DISTRICT OF OHIO   |             |           |
| Case number<br>(if known)               | 17-61538                    |             |           |

Check if this is an amended filing

## Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

#### Part 1: Summarize Your Assets

|     |   | <b>Your assets</b><br>Value of what you own |
|-----|---|---|
| 1.  | <b>Schedule A/B: Property</b> (Official Form 106A/B)          | \$ 204,702.00                               |
| 1a. | Copy line 55, Total real estate, from Schedule A/B.....       | \$ 204,702.00                               |
| 1b. | Copy line 62, Total personal property, from Schedule A/B..... | \$ 35,325.00                                |
| 1c. | Copy line 63, Total of all property on Schedule A/B.....      | \$ 240,027.00                               |

#### Part 2: Summarize Your Liabilities

|     |   | <b>Your liabilities</b><br>Amount you owe   |
|-----|---|---|
| 2.  | <b>Schedule D: Creditors Who Have Claims Secured by Property</b> (Official Form 106D)   | \$ 254,475.00                               |
| 2a. | Copy the total you listed in Column A, <i>Amount of claim</i> , at the bottom of the last page of Part 1 of <i>Schedule D</i> ... | \$ 254,475.00                               |
| 3.  | <b>Schedule E/F: Creditors Who Have Unsecured Claims</b> (Official Form 106E/F)   | \$ 0.00                                     |
| 3a. | Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i> .....                           | \$ 0.00                                     |
| 3b. | Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i> .....                        | \$ 32,304.54                                |
|     |   | <b>Your total liabilities</b> \$ 286,779.54 |

#### Part 3: Summarize Your Income and Expenses

|    |   |             |
|----|---|-------------|
| 4. | <b>Schedule I: Your Income</b> (Official Form 106I)                       | \$ 7,724.25 |
|    | Copy your combined monthly income from line 12 of <i>Schedule I</i> ..... | \$ 7,724.25 |
| 5. | <b>Schedule J: Your Expenses</b> (Official Form 106J)                     | \$ 5,075.00 |
|    | Copy your monthly expenses from line 22c of <i>Schedule J</i> .....       | \$ 5,075.00 |

#### Part 4: Answer These Questions for Administrative and Statistical Records

6. **Are you filing for bankruptcy under Chapters 7, 11, or 13?**  
 No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.  
 Yes
7. **What kind of debt do you have?**  
 **Your debts are primarily consumer debts.** *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.  
 **Your debts are not primarily consumer debts.** You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. **From the Statement of Your Current Monthly Income:** Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

|    |                 |
|----|-----------------|
| \$ | <b>6,642.46</b> |
|----|-----------------|

9. **Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:**

| From Part 4 on Schedule E/F, copy the following:   | Total claim    |
|--|----------------|
| 9a. Domestic support obligations (Copy line 6a.)   | \$ <b>0.00</b> |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)  | \$ <b>0.00</b> |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)  | \$ <b>0.00</b> |
| 9d. Student loans. (Copy line 6f.)   | \$ <b>0.00</b> |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ <b>0.00</b> |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)                                       | \$ <b>0.00</b> |
| <b>9g. Total.</b> Add lines 9a through 9f.   | \$ <b>0.00</b> |

Fill in this information to identify your case and this filing:

|  |                             |             |           |
|--|-----------------------------|-------------|-----------|
| Debtor 1   | <b>Garett W. Eackelbary</b> |             |           |
|  | First Name                  | Middle Name | Last Name |
| Debtor 2<br>(Spouse, if filing)  | First Name                  | Middle Name | Last Name |
| United States Bankruptcy Court for the: <u>NORTHERN DISTRICT OF OHIO</u> |                             |             |           |
| Case number  | <u>17-61538</u>             |             |           |

Check if this is an amended filing

## Official Form 106A/B

### Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

##### 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

No. Go to Part 2.  
 Yes. Where is the property?

1.1

#### 1213 Peony Street NW

Street address, if available, or other description

Hartville      OH      44632-0000  
City              State      ZIP Code

#### Portage

County

##### What is the property? Check all that apply

Single-family home  
 Duplex or multi-unit building  
 Condominium or cooperative  
 Manufactured or mobile home  
 Land  
 Investment property  
 Timeshare  
 Other \_\_\_\_\_

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property?

**\$204,702.00**

Current value of the portion you own?

**\$204,702.00**

Describe the nature of your ownership interest (such as fee simple, tenancy by the entirety, or a life estate), if known.

**Fee simple**

Check if this is community property  
(see instructions)

##### Who has an interest in the property? Check one

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number:

##### 2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....=>

**\$204,702.00**

#### Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

**3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles**

No  
 Yes

3.1 Make: Dodge  
 Model: Durango  
 Year: 2014  
 Approximate mileage: \_\_\_\_\_  
 Other information: \_\_\_\_\_

**Who has an interest in the property? Check one**

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

**Check if this is community property**  
(see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

**Current value of the entire property?** **Current value of the portion you own?**

\$30,000.00 \$30,000.00

**4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories**

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

No  
 Yes

5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here.....=> \$30,000.00

**Part 3: Describe Your Personal and Household Items**

Do you own or have any legal or equitable interest in any of the following items?

**Current value of the portion you own?**  
 Do not deduct secured claims or exemptions.

**6. Household goods and furnishings**

Examples: Major appliances, furniture, linens, china, kitchenware

No  
 Yes. Describe.....

**Household goods and furnishings**

\$1,500.00

**7. Electronics**

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

No  
 Yes. Describe.....

**Electronics Television computer sound system**

\$1,500.00

**8. Collectibles of value**

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

No  
 Yes. Describe.....

**9. Equipment for sports and hobbies**

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

No  
 Yes. Describe.....

**10. Firearms**

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

No

Yes. Describe.....

**11. Clothes**

Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories

No

Yes. Describe.....

|                  |
|------------------|
| debtors clothing |
|------------------|

|          |
|----------|
| \$800.00 |
|----------|

**12. Jewelry**

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

No

Yes. Describe.....

|               |
|---------------|
| Wedding rings |
|---------------|

|            |
|------------|
| \$1,000.00 |
|------------|

**13. Non-farm animals**

Examples: Dogs, cats, birds, horses

No

Yes. Describe.....

**14. Any other personal and household items you did not already list, including any health aids you did not list**

No

Yes. Give specific information.....

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here .....

|            |
|------------|
| \$4,800.00 |
|------------|

**Part 4: Describe Your Financial Assets**

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?  
Do not deduct secured claims or exemptions.

**16. Cash**

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

No

Yes.....

**17. Deposits of money**

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

No

Yes.....

Institution name:

|       |
|-------|
| 17.1. |
|-------|

|                           |
|---------------------------|
| Key Bank Checking Account |
|---------------------------|

|          |
|----------|
| \$525.00 |
|----------|

**18. Bonds, mutual funds, or publicly traded stocks**

Examples: Bond funds, investment accounts with brokerage firms, money market accounts

No

Yes.....

Institution or issuer name:

**19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture**

No

Yes. Give specific information about them.....

Name of entity:

% of ownership:

**20. Government and corporate bonds and other negotiable and non-negotiable instruments**

*Negotiable instruments* include personal checks, cashiers' checks, promissory notes, and money orders.

*Non-negotiable instruments* are those you cannot transfer to someone by signing or delivering them.

No

Yes. Give specific information about them

Issuer name:

**21. Retirement or pension accounts**

*Examples:* Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

No

Yes. List each account separately.

Type of account:

Institution name:

**22. Security deposits and prepayments**

Your share of all unused deposits you have made so that you may continue service or use from a company

*Examples:* Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

No

Yes. ....

Institution name or individual:

**23. Annuities** (A contract for a periodic payment of money to you, either for life or for a number of years)

No

Yes..... Issuer name and description.

**24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.**

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

No

Yes..... Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c):

**25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit**

No

Yes. Give specific information about them...

**26. Patents, copyrights, trademarks, trade secrets, and other intellectual property**

*Examples:* Internet domain names, websites, proceeds from royalties and licensing agreements

No

Yes. Give specific information about them...

**27. Licenses, franchises, and other general intangibles**

*Examples:* Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

No

Yes. Give specific information about them...

**Money or property owed to you?**

**Current value of the portion you own?**

Do not deduct secured claims or exemptions.

**28. Tax refunds owed to you**

No

Yes. Give specific information about them, including whether you already filed the returns and the tax years.....

**29. Family support**

*Examples:* Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

No

Yes. Give specific information.....

**30. Other amounts someone owes you**

*Examples:* Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

No

Yes. Give specific information..

**31. Interests in insurance policies**

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

 No Yes. Name the insurance company of each policy and list its value.

Company name:

Beneficiary:

Surrender or refund  
value:**32. Any interest in property that is due you from someone who has died**

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

 No Yes. Give specific information..**33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment**

Examples: Accidents, employment disputes, insurance claims, or rights to sue

 No Yes. Describe each claim.....**34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims** No Yes. Describe each claim.....**35. Any financial assets you did not already list** No Yes. Give specific information..

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here.....

**\$525.00****Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.****37. Do you own or have any legal or equitable interest in any business-related property?** No. Go to Part 6. Yes. Go to line 38.**Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.**  
If you own or have an interest in farmland, list it in Part 1.**46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?** No. Go to Part 7. Yes. Go to line 47.**Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above****53. Do you have other property of any kind you did not already list?**

Examples: Season tickets, country club membership

 No Yes. Give specific information.....

54. Add the dollar value of all of your entries from Part 7. Write that number here .....

**\$0.00**

**Part 8:** List the Totals of Each Part of this Form

|  |             |                              |
|--|-------------|------------------------------|
| 55. Part 1: Total real estate, line 2 .....                      |             | \$204,702.00                 |
| 56. Part 2: Total vehicles, line 5                               | \$30,000.00 |                              |
| 57. Part 3: Total personal and household items, line 15          | \$4,800.00  |                              |
| 58. Part 4: Total financial assets, line 36                      | \$525.00    |                              |
| 59. Part 5: Total business-related property, line 45             | \$0.00      |                              |
| 60. Part 6: Total farm- and fishing-related property, line 52    | \$0.00      |                              |
| 61. Part 7: Total other property not listed, line 54             | \$0.00      |                              |
|  | +           |                              |
| 62. Total personal property. Add lines 56 through 61...          | \$35,325.00 | Copy personal property total |
| 63. Total of all property on Schedule A/B. Add line 55 + line 62 |             | \$240,027.00                 |

Fill in this information to identify your case:

|   |                             |             |           |
|---|-----------------------------|-------------|-----------|
| Debtor 1                                | <b>Garett W. Eackelbary</b> |             |           |
|   | First Name                  | Middle Name | Last Name |
| Debtor 2<br>(Spouse if, filing)         | First Name                  | Middle Name | Last Name |
| United States Bankruptcy Court for the: | NORTHERN DISTRICT OF OHIO   |             |           |
| Case number<br>(if known)               | 17-61538                    |             |           |

Check if this is an amended filing

## Official Form 106C

### Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

#### Part 1: Identify the Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)  
 You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

| Brief description of the property and line on <i>Schedule A/B</i> that lists this property     | Current value of the portion you own | Amount of the exemption you claim  | Specific laws that allow exemption     |
|--|--------------------------------------|--|--|
| 1213 Peony Street NW Hartville, OH 44632 Portage County<br>Line from <i>Schedule A/B</i> : 1.1 | \$204,702.00                         | <input checked="" type="checkbox"/> \$136,925.00<br><input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | Ohio Rev. Code Ann. § 2329.66(A)(1)    |
| 2014 Dodge Durango<br>Line from <i>Schedule A/B</i> : 3.1                                      | \$30,000.00                          | <input checked="" type="checkbox"/> \$3,775.00<br><input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit   | Ohio Rev. Code Ann. § 2329.66(A)(2)    |
| Household goods and furnishings<br>Line from <i>Schedule A/B</i> : 6.1                         | \$1,500.00                           | <input checked="" type="checkbox"/> \$1,500.00<br><input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit   | Ohio Rev. Code Ann. § 2329.66(A)(4)(a) |
| Electronics Television computer sound system<br>Line from <i>Schedule A/B</i> : 7.1            | \$1,500.00                           | <input checked="" type="checkbox"/> \$1,500.00<br><input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit   | Ohio Rev. Code Ann. § 2329.66(A)(4)(a) |
| debtors clothing<br>Line from <i>Schedule A/B</i> : 11.1                                       | \$800.00                             | <input checked="" type="checkbox"/> \$800.00<br><input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit     | Ohio Rev. Code Ann. § 2329.66(A)(4)(a) |

| Brief description of the property and line on<br><i>Schedule A/B</i> that lists this property | Current value of the<br>portion you own | Amount of the exemption you claim  | Specific laws that allow exemption                      |
|---|---|--|---|
| <b>Wedding rings</b><br>Line from <i>Schedule A/B: 12.1</i>                                   | <b>\$1,000.00</b>                       | <input checked="" type="checkbox"/> <b>\$1,000.00</b><br><input type="checkbox"/> 100% of fair market value, up to<br>any applicable statutory limit | <b>Ohio Rev. Code Ann. §</b><br><b>2329.66(A)(4)(b)</b> |
| <b>Key Bank Checking Account</b><br>Line from <i>Schedule A/B: 17.1</i>                       | <b>\$525.00</b>                         | <input checked="" type="checkbox"/> <b>\$475.00</b><br><input type="checkbox"/> 100% of fair market value, up to<br>any applicable statutory limit   | <b>Ohio Rev. Code Ann. §</b><br><b>2329.66(A)(3)</b>    |

**3. Are you claiming a homestead exemption of more than \$160,375?**

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

No

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

No

Yes

Fill in this information to identify your case:

|   |                             |             |           |
|---|-----------------------------|-------------|-----------|
| Debtor 1                                | <b>Garett W. Eackelbary</b> |             |           |
|   | First Name                  | Middle Name | Last Name |
| Debtor 2<br>(Spouse if, filing)         | First Name                  | Middle Name | Last Name |
| United States Bankruptcy Court for the: | NORTHERN DISTRICT OF OHIO   |             |           |
| Case number<br>(if known)               | 17-61538                    |             |           |

Check if this is an amended filing

## Official Form 106D

### Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

#### 1. Do any creditors have claims secured by your property?

No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.

Yes. Fill in all of the information below.

#### Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

|     | Describe the property that secures the claim:    | Column A<br>Amount of claim<br>Do not deduct the value of collateral. | Column B<br>Value of collateral that supports this claim | Column C<br>Unsecured portion<br>If any |
|-----|--|---|--|---|
| 2.1 | <b>Chrysler Financial</b><br><br>Creditor's Name | \$22,000.00   | \$30,000.00  | \$0.00                                  |

**P.O. Box 9001921  
Louisville, KY 40290**

Number, Street, City, State & Zip Code

Who owes the debt? Check one.

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim relates to a community debt

As of the date you file, the claim is: Check all that apply.

Contingent  
 Unliquidated  
 Disputed

Nature of lien. Check all that apply.

An agreement you made (such as mortgage or secured car loan)  
 Statutory lien (such as tax lien, mechanic's lien)  
 Judgment lien from a lawsuit  
 Other (including a right to offset) \_\_\_\_\_

Date debt was incurred **2014**

Last 4 digits of account number \_\_\_\_\_

#### 2.2 Wells Fargo Hm Mortgag

Creditor's Name

**8480 Stagecoach Cir  
Frederick, MD 21701**

Number, Street, City, State & Zip Code

Who owes the debt? Check one.

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim relates to a community debt

Describe the property that secures the claim:

**FHA Real Estate Mortgage**

\$232,475.00

Unknown

Unknown

As of the date you file, the claim is: Check all that apply.

Contingent  
 Unliquidated  
 Disputed

Nature of lien. Check all that apply.

An agreement you made (such as mortgage or secured car loan)  
 Statutory lien (such as tax lien, mechanic's lien)  
 Judgment lien from a lawsuit  
 Other (including a right to offset) \_\_\_\_\_

Debtor 1 **Garett W. Eackelbary**  
First Name Middle Name Last Name

Case number (if known) **17-61538**

**Opened  
08/03 Last  
Active  
2/21/17** Date debt was incurred **Last 4 digits of account number 5924**

Add the dollar value of your entries in Column A on this page. Write that number here:

**\$254,475.00**

If this is the last page of your form, add the dollar value totals from all pages.

**\$254,475.00**

Write that number here:

**Part 2: List Others to Be Notified for a Debt That You Already Listed**

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Fill in this information to identify your case:

|   |                             |             |           |
|---|-----------------------------|-------------|-----------|
| Debtor 1                                | <b>Garett W. Eackelbary</b> |             |           |
|   | First Name                  | Middle Name | Last Name |
| Debtor 2<br>(Spouse if, filing)         | First Name                  | Middle Name | Last Name |
| United States Bankruptcy Court for the: | NORTHERN DISTRICT OF OHIO   |             |           |
| Case number<br>(if known)               | 17-61538                    |             |           |

Check if this is an amended filing

## Official Form 106E/F

### Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

No. Go to Part 2.  
 Yes.

#### Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

No. You have nothing to report in this part. Submit this form to the court with your other schedules.  
 Yes.

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

|     |  | Total claim   |
|-----|--|---|
| 4.1 | Afni, Inc.<br>Nonpriority Creditor's Name<br>Po Box 3097<br>Bloomington, IL 61702<br>Number Street City State Zip Code<br>Who incurred the debt? Check one.<br><input checked="" type="checkbox"/> Debtor 1 only<br><input type="checkbox"/> Debtor 2 only<br><input type="checkbox"/> Debtor 1 and Debtor 2 only<br><input type="checkbox"/> At least one of the debtors and another<br><input type="checkbox"/> Check if this claim is for a community debt<br>Is the claim subject to offset?<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Yes | Last 4 digits of account number<br>2951<br>When was the debt incurred?<br>Opened 12/16<br>As of the date you file, the claim is: Check all that apply<br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br>Type of NONPRIORITY unsecured claim:<br><input type="checkbox"/> Student loans<br><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims<br><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts<br><input checked="" type="checkbox"/> Other. Specify <u>Collection Attorney At T Mobility</u> |

Debtor 1 **Garett W. Eackelbary**

Case number (if known)

**17-61538**

|     |  |   |   |
|-----|--|---|---|
| 4.2 | <b>American General Finance Inc.</b><br>Nonpriority Creditor's Name<br><b>601 NW 2nd Street<br/>Evansville, IN 47708</b><br>Number Street City State Zip Code  | Last 4 digits of account number   | <b>\$2,800.00</b>                       |
|     | Who incurred the debt? Check one.  | When was the debt incurred?   | <b>2015</b>                             |
|     | <input checked="" type="checkbox"/> Debtor 1 only<br><input type="checkbox"/> Debtor 2 only<br><input type="checkbox"/> Debtor 1 and Debtor 2 only<br><input type="checkbox"/> At least one of the debtors and another<br><input type="checkbox"/> Check if this claim is for a community debt<br> | <b>As of the date you file, the claim is:</b> Check all that apply<br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><b>Type of NONPRIORITY unsecured claim:</b><br><input type="checkbox"/> Student loans<br><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims<br><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts<br><input checked="" type="checkbox"/> Other. Specify <b>Judgment lien</b> |   |
|     | Is the claim subject to offset?  |   |   |
|     | <input checked="" type="checkbox"/> No<br><input type="checkbox"/> Yes   |   |   |
| 4.3 | <b>Capital One</b><br>Nonpriority Creditor's Name<br><b>15000 Capital One Dr<br/>Richmond, VA 23238</b><br>Number Street City State Zip Code   | Last 4 digits of account number   | <b>\$234.00</b>                         |
|     | Who incurred the debt? Check one.  | When was the debt incurred?   | <b>Opened 02/17 Last Active 5/05/17</b> |
|     | <input checked="" type="checkbox"/> Debtor 1 only<br><input type="checkbox"/> Debtor 2 only<br><input type="checkbox"/> Debtor 1 and Debtor 2 only<br><input type="checkbox"/> At least one of the debtors and another<br><input type="checkbox"/> Check if this claim is for a community debt<br> | <b>As of the date you file, the claim is:</b> Check all that apply<br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><b>Type of NONPRIORITY unsecured claim:</b><br><input type="checkbox"/> Student loans<br><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims<br><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts<br><input checked="" type="checkbox"/> Other. Specify <b>Credit Card</b>   |   |
| 4.4 | <b>Capital One Bank</b><br>Nonpriority Creditor's Name<br><b>P.O.Box 30253<br/>Salt Lake City, UT 84130</b><br>Number Street City State Zip Code   | Last 4 digits of account number   | <b>\$635.00</b>                         |
|     | Who incurred the debt? Check one.  | When was the debt incurred?   | <b>2007</b>                             |
|     | <input checked="" type="checkbox"/> Debtor 1 only<br><input type="checkbox"/> Debtor 2 only<br><input type="checkbox"/> Debtor 1 and Debtor 2 only<br><input type="checkbox"/> At least one of the debtors and another<br><input type="checkbox"/> Check if this claim is for a community debt<br> | <b>As of the date you file, the claim is:</b> Check all that apply<br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><b>Type of NONPRIORITY unsecured claim:</b><br><input type="checkbox"/> Student loans<br><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims<br><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts<br><input checked="" type="checkbox"/> Other. Specify <b>Credit Card</b>   |   |
|     | Is the claim subject to offset?  |   |   |
|     | <input checked="" type="checkbox"/> No<br><input type="checkbox"/> Yes   |   |   |

Debtor 1 **Garett W. Eackelbary**

Case number (if known)

**17-61538**

|     |  |  |            |
|-----|--|--|------------|
| 4.5 | <b>Capital One Bank</b><br>Nonpriority Creditor's Name<br><b>P.O. Box 62180</b><br><b>Salt Lake City, UT 84130</b><br>Number Street City State Zip Code  | Last 4 digits of account number <b>6812</b>  | \$1,000.00 |
|     | <b>Who incurred the debt?</b> Check one.   | <b>When was the debt incurred?</b> <b>2015</b>   |            |
|     | <input checked="" type="checkbox"/> Debtor 1 only<br><input type="checkbox"/> Debtor 2 only<br><input type="checkbox"/> Debtor 1 and Debtor 2 only<br><input type="checkbox"/> At least one of the debtors and another | <input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed  |            |
|     | <input type="checkbox"/> <b>Check if this claim is for a community debt</b>  | <b>Type of NONPRIORITY unsecured claim:</b>  |            |
|     | <b>Is the claim subject to offset?</b>   | <input type="checkbox"/> Student loans<br><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims<br><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts |            |
|     | <input checked="" type="checkbox"/> No<br><input type="checkbox"/> Yes   | <input checked="" type="checkbox"/> Other. Specify <b>Credit card bill</b>   |            |
| 4.6 | <b>Credit Collections SVC</b><br>Nonpriority Creditor's Name<br><b>P.O. Box 773</b><br><b>Needham Heights, MA 02494</b><br>Number Street City State Zip Code   | Last 4 digits of account number <b>2488</b>  | \$194.00   |
|     | <b>Who incurred the debt?</b> Check one.   | <b>When was the debt incurred?</b> <b>2016</b>   |            |
|     | <input checked="" type="checkbox"/> Debtor 1 only<br><input type="checkbox"/> Debtor 2 only<br><input type="checkbox"/> Debtor 1 and Debtor 2 only<br><input type="checkbox"/> At least one of the debtors and another | <input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed  |            |
|     | <input type="checkbox"/> <b>Check if this claim is for a community debt</b>  | <b>Type of NONPRIORITY unsecured claim:</b>  |            |
|     | <b>Is the claim subject to offset?</b>   | <input type="checkbox"/> Student loans<br><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims<br><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts |            |
|     | <input checked="" type="checkbox"/> No<br><input type="checkbox"/> Yes   | <input checked="" type="checkbox"/> Other. Specify <b>Collection for Progressive Insurance</b>   |            |
| 4.7 | <b>ERC/Enhanced Recovery</b><br>Nonpriority Creditor's Name<br><b>8014 Bayberry Road</b><br><b>Jacksonville, FL 32256</b><br>Number Street City State Zip Code   | Last 4 digits of account number <b>7511</b>  | \$1,253.00 |
|     | <b>Who incurred the debt?</b> Check one.   | <b>When was the debt incurred?</b> <b>2014</b>   |            |
|     | <input checked="" type="checkbox"/> Debtor 1 only<br><input type="checkbox"/> Debtor 2 only<br><input type="checkbox"/> Debtor 1 and Debtor 2 only<br><input type="checkbox"/> At least one of the debtors and another | <input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed  |            |
|     | <input type="checkbox"/> <b>Check if this claim is for a community debt</b>  | <b>Type of NONPRIORITY unsecured claim:</b>  |            |
|     | <b>Is the claim subject to offset?</b>   | <input type="checkbox"/> Student loans<br><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims<br><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts |            |
|     | <input checked="" type="checkbox"/> No<br><input type="checkbox"/> Yes   | <input checked="" type="checkbox"/> Other. Specify <b>Collection for AT&amp;T</b>  |            |

Debtor 1 **Garett W. Eackelbary**

Case number (if known)

**17-61538**

|  |   |  |          |
|--|---|--|----------|
| 4.8  | <b>Fidelity Properties In</b><br>Nonpriority Creditor's Name<br><b>220 E Main St</b><br><b>Alliance, OH 44601</b><br>Number Street City State Zip Code  | Last 4 digits of account number<br><b>4743</b> | \$173.00 |
| Who incurred the debt? Check one.  |   |  |          |
| <input checked="" type="checkbox"/> Debtor 1 only<br><input type="checkbox"/> Debtor 2 only<br><input type="checkbox"/> Debtor 1 and Debtor 2 only<br><input type="checkbox"/> At least one of the debtors and another   |   |  |          |
| <input type="checkbox"/> Check if this claim is for a community debt<br>Is the claim subject to offset?<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Yes  |   |  |          |
| <b>Type of NONPRIORITY unsecured claim:</b><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><input type="checkbox"/> Student loans<br><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims<br><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts |   |  |          |
| <b>Collection Attorney Prof Anesthesia Service Inc</b>   |   |  |          |
| 4.9  | <b>First Federal Credit &amp; collections</b><br>Nonpriority Creditor's Name<br><b>24700 Chagrin Blvd., Suite 205</b><br><b>Cleveland, OH 00004-4122</b><br>Number Street City State Zip Code | Last 4 digits of account number<br><b>8163</b> | \$225.00 |
| Who incurred the debt? Check one.  |   |  |          |
| <input checked="" type="checkbox"/> Debtor 1 only<br><input type="checkbox"/> Debtor 2 only<br><input type="checkbox"/> Debtor 1 and Debtor 2 only<br><input type="checkbox"/> At least one of the debtors and another   |   |  |          |
| <input type="checkbox"/> Check if this claim is for a community debt<br>Is the claim subject to offset?<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Yes  |   |  |          |
| <b>Type of NONPRIORITY unsecured claim:</b><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><input type="checkbox"/> Student loans<br><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims<br><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts |   |  |          |
| <b>Collection for Emergency Associates</b>   |   |  |          |
| 4.1<br>0   | <b>First Premier</b><br>Nonpriority Creditor's Name<br><b>601 Minneapolis Ave.</b><br><b>Sioux Falls, SD 57104</b><br>Number Street City State Zip Code                                       | Last 4 digits of account number<br><b>7073</b> | \$415.00 |
| Who incurred the debt? Check one.  |   |  |          |
| <input checked="" type="checkbox"/> Debtor 1 only<br><input type="checkbox"/> Debtor 2 only<br><input type="checkbox"/> Debtor 1 and Debtor 2 only<br><input type="checkbox"/> At least one of the debtors and another   |   |  |          |
| <input type="checkbox"/> Check if this claim is for a community debt<br>Is the claim subject to offset?<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Yes  |   |  |          |
| <b>Type of NONPRIORITY unsecured claim:</b><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><input type="checkbox"/> Student loans<br><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims<br><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts |   |  |          |
| <b>Credit Card</b>   |   |  |          |

Debtor 1 Garett W. Eackelbary

Case number (if known)

17-615384.1  
1**LVNV Funding, LLC**

Nonpriority Creditor's Name

**625 Pilot Rd.****Ste. 3****Las Vegas, NV 89119-4485**

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

No  
 Yes

Last 4 digits of account number

XXXX-XXXX-X  
XXX-\$2,587.74

When was the debt incurred?

2015

As of the date you file, the claim is: Check all that apply

Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify Judgment

4.1  
2**Michael D. Miller**

Nonpriority Creditor's Name

**5045 Hollyhock Ave.****Canton, OH 44718**

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

No  
 Yes

Last 4 digits of account number

XXX-XX-XXXX\$6,000.00

When was the debt incurred?

2015

As of the date you file, the claim is: Check all that apply

Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify Judgment

4.1  
3**National Credit Systems**

Nonpriority Creditor's Name

**117 E. 24th Street****New York, NY 10010**

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

No  
 Yes

Last 4 digits of account number

2216\$205.00

When was the debt incurred?

2015

As of the date you file, the claim is: Check all that apply

Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify Collection for Grassmaster, Inc.

Debtor 1 Garett W. Eackelbary

Case number (if known)

17-615384.1  
4**Scott Hendricks, DDS**

Nonpriority Creditor's Name

**C/o Robert McNamara, Esq.  
McNamara Demczyk Co., LPA  
1370 Cleveland Ave.  
Uniontown, OH 44685**

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

Is the claim subject to offset?

No  
 Yes

Last 4 digits of account number

XXX-XX-XXXX\$3,107.80

When was the debt incurred?

2015

As of the date you file, the claim is: Check all that apply

Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts

 Other. Specify Judgment4.1  
5**Team Recovery**

Nonpriority Creditor's Name

**3928 Clock Pointe Trail  
Stow, OH 44224**

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

Is the claim subject to offset?

No  
 Yes

Last 4 digits of account number

6527\$111.00When was the debt incurred? Opened 1/14/15

As of the date you file, the claim is: Check all that apply

Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts

 Other. Specify Aultman Orrville Hospital Fi4.1  
6**United States of America**

Nonpriority Creditor's Name

**US Attorney Northern Division of Oh****801 West Superior Ave  
Suite #400  
Cleveland, OH 44113**

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

Is the claim subject to offset?

No  
 Yes

Last 4 digits of account number

XXX-XX-XXXX\$12,000.00When was the debt incurred? 2013-15

As of the date you file, the claim is: Check all that apply

Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts

 Other. Specify 2013-15 Federal Taxes owed

|          |  |  |          |
|----------|--|--|----------|
| 4.1<br>7 | <b>West Asset</b><br>Nonpriority Creditor's Name<br><b>2703 N. Highway 75</b><br><b>Sherman, TX 75090</b><br>Number Street City State Zip Code   | Last 4 digits of account number<br><b>6527</b>   | \$111.00 |
|          | Who incurred the debt? Check one.  | When was the debt incurred?<br><b>2014</b>   |          |
|          | <input checked="" type="checkbox"/> Debtor 1 only<br><input type="checkbox"/> Debtor 2 only<br><input type="checkbox"/> Debtor 1 and Debtor 2 only<br><input type="checkbox"/> At least one of the debtors and another | <input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed  |          |
|          | <input type="checkbox"/> Check if this claim is for a community debt   | Type of NONPRIORITY unsecured claim:   |          |
|          | Is the claim subject to offset?  | <input type="checkbox"/> Student loans<br><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims<br><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts |          |
|          | <input checked="" type="checkbox"/> No<br><input type="checkbox"/> Yes   | <input checked="" type="checkbox"/> Other. Specify <b>Collection for Aultman Orrville Hospital</b>   |          |

**Part 3: List Others to Be Notified About a Debt That You Already Listed**

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Name and Address

**Erin Enderle, Esq.**  
**810 Sycamore Street, 3rd Floor**  
**Cincinnati, OH 45202**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.11** of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**Part 4: Add the Amounts for Each Type of Unsecured Claim**

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

|                                 |   | <b>Total Claim</b>                                  |
|---------------------------------|---|---|
| <b>Total claims from Part 1</b> | 6a. Domestic support obligations  | 6a. \$ <b>0.00</b>                                  |
|                                 | 6b. Taxes and certain other debts you owe the government  | 6b. \$ <b>0.00</b>                                  |
|                                 | 6c. Claims for death or personal injury while you were intoxicated  | 6c. \$ <b>0.00</b>                                  |
|                                 | 6d. Other. Add all other priority unsecured claims. Write that amount here.                                 | 6d. \$ <b>0.00</b>                                  |
|                                 |   | <b>6e. Total Priority.</b> Add lines 6a through 6d. |
| 6e.                             | \$ <b>0.00</b>  |   |
| <b>Total claims from Part 2</b> | 6f. Student loans   | 6f. \$ <b>0.00</b>                                  |
|                                 | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. \$ <b>0.00</b>                                  |
|                                 | 6h. Debts to pension or profit-sharing plans, and other similar debts                                       | 6h. \$ <b>0.00</b>                                  |
|                                 | 6i. Other. Add all other nonpriority unsecured claims. Write that amount here.                              | 6i. \$ <b>32,304.54</b>                             |
|                                 | 6j. Total Nonpriority. Add lines 6f through 6i.   | \$ <b>32,304.54</b>                                 |

Fill in this information to identify your case:

|   |                             |             |           |
|---|-----------------------------|-------------|-----------|
| Debtor 1                                | <b>Garett W. Eackelbary</b> |             |           |
|   | First Name                  | Middle Name | Last Name |
| Debtor 2<br>(Spouse if, filing)         | First Name                  | Middle Name | Last Name |
| United States Bankruptcy Court for the: | NORTHERN DISTRICT OF OHIO   |             |           |
| Case number<br>(if known)               | 17-61538                    |             |           |

Check if this is an amended filing

## Official Form 106G

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.  
 Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B:Property* (Official Form 106 A/B).

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

|     | Person or company with whom you have the contract or lease |        |          | State what the contract or lease is for |
|-----|--|--------|----------|---|
|     | Name, Number, Street, City, State and ZIP Code             |        |          |   |
| 2.1 | Name   |        |          |   |
|     | Number   | Street |          |   |
|     | City   | State  | ZIP Code |   |
| 2.2 | Name   |        |          |   |
|     | Number   | Street |          |   |
|     | City   | State  | ZIP Code |   |
| 2.3 | Name   |        |          |   |
|     | Number   | Street |          |   |
|     | City   | State  | ZIP Code |   |
| 2.4 | Name   |        |          |   |
|     | Number   | Street |          |   |
|     | City   | State  | ZIP Code |   |
| 2.5 | Name   |        |          |   |
|     | Number   | Street |          |   |
|     | City   | State  | ZIP Code |   |

Fill in this information to identify your case:

|   |                             |             |           |
|---|-----------------------------|-------------|-----------|
| Debtor 1                                | <b>Garett W. Eackelbary</b> |             |           |
|   | First Name                  | Middle Name | Last Name |
| Debtor 2<br>(Spouse if, filing)         | First Name                  | Middle Name | Last Name |
| United States Bankruptcy Court for the: | NORTHERN DISTRICT OF OHIO   |             |           |
| Case number<br>(if known)               | <u>17-61538</u>             |             |           |

Check if this is an amended filing

## Official Form 106H Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)

No  
 Yes

2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

No. Go to line 3.  
 Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

**Column 1: Your codebtor**

Name, Number, Street, City, State and ZIP Code

**Column 2: The creditor to whom you owe the debt**

Check all schedules that apply:

3.1

Name \_\_\_\_\_

Schedule D, line \_\_\_\_\_  
 Schedule E/F, line \_\_\_\_\_  
 Schedule G, line \_\_\_\_\_

Number \_\_\_\_\_ Street \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

3.2

Name \_\_\_\_\_

Schedule D, line \_\_\_\_\_  
 Schedule E/F, line \_\_\_\_\_  
 Schedule G, line \_\_\_\_\_

Number \_\_\_\_\_ Street \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Fill in this information to identify your case:

|   |                           |
|---|---------------------------|
| Debtor 1                                | Garett W. Eackelbary      |
| Debtor 2<br>(Spouse, if filing)         |                           |
| United States Bankruptcy Court for the: | NORTHERN DISTRICT OF OHIO |
| Case number<br>(If known)               | 17-61538                  |

Check if this is:

An amended filing  
 A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

## Official Form 106I

### Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

Employment status

Debtor 1

Employed  
 Not employed

Debtor 2 or non-filing spouse

Employed  
 Not employed

Occupation

Finance Manager

Employer's name

Taylor Kia

Employer's address

7870 Market Street  
Youngstown, OH 44512

How long employed there?

3 months

#### Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

|  | For Debtor 1           | For Debtor 2 or non-filing spouse |
|--|------------------------|-----------------------------------|
| 2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. | 2. \$ <u>10,750.00</u> | \$ <u>N/A</u>                     |
| 3. Estimate and list monthly overtime pay.   | 3. +\$ <u>0.00</u>     | +\$ <u>N/A</u>                    |
| 4. Calculate gross Income. Add line 2 + line 3.  | 4. \$ <u>10,750.00</u> | \$ <u>N/A</u>                     |

2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.  
3. Estimate and list monthly overtime pay.  
4. Calculate gross Income. Add line 2 + line 3.

| Copy line 4 here .....   | For Debtor 1           | For Debtor 2 or non-filing spouse    |
|--|------------------------|--------------------------------------|
| <b>4.</b> \$ <b>10,750.00</b>  | \$ <b>N/A</b>          |                                      |
| <b>5. List all payroll deductions:</b>   |                        |                                      |
| 5a. Tax, Medicare, and Social Security deductions  | 5a. \$ <b>2,500.00</b> | \$ <b>N/A</b>                        |
| 5b. Mandatory contributions for retirement plans   | 5b. \$ <b>0.00</b>     | \$ <b>N/A</b>                        |
| 5c. Voluntary contributions for retirement plans   | 5c. \$ <b>0.00</b>     | \$ <b>N/A</b>                        |
| 5d. Required repayments of retirement fund loans   | 5d. \$ <b>0.00</b>     | \$ <b>N/A</b>                        |
| 5e. Insurance  | 5e. \$ <b>525.75</b>   | \$ <b>N/A</b>                        |
| 5f. Domestic support obligations   | 5f. \$ <b>0.00</b>     | \$ <b>N/A</b>                        |
| 5g. Union dues   | 5g. \$ <b>0.00</b>     | \$ <b>N/A</b>                        |
| 5h. Other deductions. Specify: _____   | 5h.+ \$ <b>0.00</b>    | + \$ <b>N/A</b>                      |
| <b>6. Add the payroll deductions.</b> Add lines 5a+5b+5c+5d+5e+5f+5g+5h.   | <b>6. \$ 3,025.75</b>  | \$ <b>N/A</b>                        |
| <b>7. Calculate total monthly take-home pay.</b> Subtract line 6 from line 4.  | <b>7. \$ 7,724.25</b>  | \$ <b>N/A</b>                        |
| <b>8. List all other income regularly received:</b>  |                        |                                      |
| 8a. Net income from rental property and from operating a business, profession, or farm<br>Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  | 8a. \$ <b>0.00</b>     | \$ <b>N/A</b>                        |
| 8b. Interest and dividends   | 8b. \$ <b>0.00</b>     | \$ <b>N/A</b>                        |
| 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive<br>Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  | 8c. \$ <b>0.00</b>     | \$ <b>N/A</b>                        |
| 8d. Unemployment compensation  | 8d. \$ <b>0.00</b>     | \$ <b>N/A</b>                        |
| 8e. Social Security  | 8e. \$ <b>0.00</b>     | \$ <b>N/A</b>                        |
| 8f. Other government assistance that you regularly receive<br>Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.<br>Specify: _____   | 8f. \$ <b>0.00</b>     | \$ <b>N/A</b>                        |
| 8g. Pension or retirement income   | 8g. \$ <b>0.00</b>     | \$ <b>N/A</b>                        |
| 8h. Other monthly income. Specify: _____   | 8h.+ \$ <b>0.00</b>    | + \$ <b>N/A</b>                      |
| <b>9. Add all other income.</b> Add lines 8a+8b+8c+8d+8e+8f+8g+8h.   | <b>9. \$ 0.00</b>      | \$ <b>N/A</b>                        |
| <b>10. Calculate monthly income.</b> Add line 7 + line 9.<br>Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  | <b>10. \$ 7,724.25</b> | + \$ <b>N/A</b> = \$ <b>7,724.25</b> |
| <b>11. State all other regular contributions to the expenses that you list in Schedule J.</b><br>Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.<br>Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.<br>Specify: _____ | 11. +\$ <b>0.00</b>    |                                      |
| <b>12. Add the amount in the last column of line 10 to the amount in line 11.</b> The result is the combined monthly income.<br>Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies   | 12. \$ <b>7,724.25</b> |                                      |
| <b>13. Do you expect an increase or decrease within the year after you file this form?</b>   |                        |                                      |
| <input checked="" type="checkbox"/> No.  |                        |                                      |
| <input type="checkbox"/> Yes. Explain: _____   |                        |                                      |

Fill in this information to identify your case:

|   |                                  |
|---|----------------------------------|
| Debtor 1                                | <b>Garett W. Eackelbary</b>      |
| Debtor 2<br>(Spouse, if filing)         |                                  |
| United States Bankruptcy Court for the: | <b>NORTHERN DISTRICT OF OHIO</b> |
| Case number<br>(If known)               | <b>17-61538</b>                  |

Check if this is:

An amended filing  
 A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

## Official Form 106J

### Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Your Household

##### 1. Is this a joint case?

No. Go to line 2.  
 Yes. Does Debtor 2 live in a separate household?  
 No  
 Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.

##### 2. Do you have dependents? No

Do not list Debtor 1 and Debtor 2.  Yes. Fill out this information for each dependent.....

Do not state the dependents names.

| Dependent's relationship to Debtor 1 or Debtor 2 | Dependent's age | Does dependent live with you?  |
|--|-----------------|--|
| Son  | 9               | <input type="checkbox"/> No<br><input checked="" type="checkbox"/> Yes<br><input type="checkbox"/> No<br><input checked="" type="checkbox"/> Yes<br><input type="checkbox"/> No<br><input type="checkbox"/> Yes<br><input type="checkbox"/> No<br><input type="checkbox"/> Yes |
| Daughter   | 14              | <input type="checkbox"/> No<br><input checked="" type="checkbox"/> Yes<br><input type="checkbox"/> No<br><input checked="" type="checkbox"/> Yes<br><input type="checkbox"/> No<br><input type="checkbox"/> Yes<br><input type="checkbox"/> No<br><input type="checkbox"/> Yes |

##### 3. Do your expenses include expenses of people other than yourself and your dependents? No Yes

#### Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I).

##### 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

#### Your expenses

4. \$ **0.00**

##### If not included in line 4:

4a. Real estate taxes  
4b. Property, homeowner's, or renter's insurance  
4c. Home maintenance, repair, and upkeep expenses  
4d. Homeowner's association or condominium dues  
5. Additional mortgage payments for your residence, such as home equity loans

|        |               |
|--------|---------------|
| 4a. \$ | <b>0.00</b>   |
| 4b. \$ | <b>0.00</b>   |
| 4c. \$ | <b>225.00</b> |
| 4d. \$ | <b>0.00</b>   |
| 5. \$  | <b>0.00</b>   |

|  |  |                      |
|--|--|----------------------|
| <b>6. Utilities:</b>   | 6a. Electricity, heat, natural gas                                 | 6a. \$ <b>450.00</b> |
|  | 6b. Water, sewer, garbage collection                               | 6b. \$ <b>125.00</b> |
|  | 6c. Telephone, cell phone, Internet, satellite, and cable services | 6c. \$ <b>425.00</b> |
|  | 6d. Other. Specify: _____  | 6d. \$ <b>0.00</b>   |
| <b>7. Food and housekeeping supplies</b>   | 7. \$ <b>470.00</b>  |                      |
| <b>8. Childcare and children's education costs</b>   | 8. \$ <b>700.00</b>  |                      |
| <b>9. Clothing, laundry, and dry cleaning</b>  | 9. \$ <b>325.00</b>  |                      |
| <b>10. Personal care products and services</b>   | 10. \$ <b>50.00</b>  |                      |
| <b>11. Medical and dental expenses</b>   | 11. \$ <b>200.00</b>   |                      |
| <b>12. Transportation.</b> Include gas, maintenance, bus or train fare.<br>Do not include car payments.  | 12. \$ <b>225.00</b>   |                      |
| <b>13. Entertainment, clubs, recreation, newspapers, magazines, and books</b>  | 13. \$ <b>50.00</b>  |                      |
| <b>14. Charitable contributions and religious donations</b>  | 14. \$ <b>0.00</b>   |                      |
| <b>15. Insurance.</b><br>Do not include insurance deducted from your pay or included in lines 4 or 20.   |  |                      |
| 15a. Life insurance  | 15a. \$ <b>150.00</b>  |                      |
| 15b. Health insurance  | 15b. \$ <b>0.00</b>  |                      |
| 15c. Vehicle insurance   | 15c. \$ <b>175.00</b>  |                      |
| 15d. Other insurance. Specify: _____   | 15d. \$ <b>0.00</b>  |                      |
| <b>16. Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20.<br>Specify: <b>Hartville Local Tax</b>   | 16. \$ <b>255.00</b>   |                      |
| <b>17. Installment or lease payments:</b>  |  |                      |
| 17a. Car payments for Vehicle 1  | 17a. \$ <b>700.00</b>  |                      |
| 17b. Car payments for Vehicle 2  | 17b. \$ <b>0.00</b>  |                      |
| 17c. Other. Specify: _____   | 17c. \$ <b>0.00</b>  |                      |
| 17d. Other. Specify: _____   | 17d. \$ <b>0.00</b>  |                      |
| <b>18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).</b>   | 18. \$ <b>0.00</b>   |                      |
| <b>19. Other payments you make to support others who do not live with you.</b><br>Specify: _____   | \$ <b>0.00</b>   |                      |
| <b>20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.</b>   |  |                      |
| 20a. Mortgages on other property   | 20a. \$ <b>0.00</b>  |                      |
| 20b. Real estate taxes   | 20b. \$ <b>0.00</b>  |                      |
| 20c. Property, homeowner's, or renter's insurance  | 20c. \$ <b>0.00</b>  |                      |
| 20d. Maintenance, repair, and upkeep expenses  | 20d. \$ <b>0.00</b>  |                      |
| 20e. Homeowner's association or condominium dues   | 20e. \$ <b>0.00</b>  |                      |
| <b>21. Other:</b> Specify: <b>Pet Care</b><br><b>Children School Expenses</b>  |  |                      |
| <b>22. Calculate your monthly expenses</b>   |  |                      |
| 22a. Add lines 4 through 21.   | \$ <b>5,075.00</b>   |                      |
| 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2   | \$ <b>5,075.00</b>   |                      |
| 22c. Add line 22a and 22b. The result is your monthly expenses.  |  |                      |
| <b>23. Calculate your monthly net income.</b>  |  |                      |
| 23a. Copy line 12 ( <i>your combined monthly income</i> ) from Schedule I.   | 23a. \$ <b>7,724.25</b>  |                      |
| 23b. Copy your monthly expenses from line 22c above.   | 23b. -\$ <b>5,075.00</b>   |                      |
| 23c. Subtract your monthly expenses from your monthly income.<br>The result is your <i>monthly net income</i> .  | 23c. \$ <b>2,649.25</b>  |                      |
| <b>24. Do you expect an increase or decrease in your expenses within the year after you file this form?</b><br>For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? |  |                      |
| <input checked="" type="checkbox"/> No.  |  |                      |
| <input type="checkbox"/> Yes.  | Explain here: _____  |                      |

**Fill in this information to identify your case:**

|   |                             |             |           |
|---|-----------------------------|-------------|-----------|
| Debtor 1                                | <b>Garett W. Eackelbary</b> |             |           |
|   | First Name                  | Middle Name | Last Name |
| Debtor 2<br>(Spouse if, filing)         | First Name                  | Middle Name | Last Name |
| United States Bankruptcy Court for the: | NORTHERN DISTRICT OF OHIO   |             |           |
| Case number<br>(if known)               | 17-61538                    |             |           |

Check if this is an amended filing

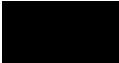
**Official Form 106Dec**

**Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

 Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

No

Yes. Name of person \_\_\_\_\_

Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119)

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X /s/ Garett W. Eackelbary

**Garett W. Eackelbary**

Signature of Debtor 1

Date August 7, 2017

X

\_\_\_\_\_  
Signature of Debtor 2

Date \_\_\_\_\_

Fill in this information to identify your case:

|   |                             |             |           |
|---|-----------------------------|-------------|-----------|
| Debtor 1                                | <b>Garett W. Eackelbary</b> |             |           |
|   | First Name                  | Middle Name | Last Name |
| Debtor 2<br>(Spouse if, filing)         | First Name                  | Middle Name | Last Name |
| United States Bankruptcy Court for the: | NORTHERN DISTRICT OF OHIO   |             |           |
| Case number<br>(if known)               | 17-61538                    |             |           |

Check if this is an amended filing

## Official Form 107

### Statement of Financial Affairs for Individuals Filing for Bankruptcy

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Give Details About Your Marital Status and Where You Lived Before

##### 1. What is your current marital status?

Married  
 Not married

##### 2. During the last 3 years, have you lived anywhere other than where you live now?

No  
 Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

Debtor 1 Prior Address:

Dates Debtor 1  
lived there

Debtor 2 Prior Address:

Dates Debtor 2  
lived there

##### 3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.)

No  
 Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

#### Part 2 Explain the Sources of Your Income

##### 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.  
If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

No  
 Yes. Fill in the details.

| From January 1 of current year until the date you filed for bankruptcy: | Debtor 1<br>Sources of income<br>Check all that apply.   | Debtor 2<br>Sources of income<br>Check all that apply.  | Gross income<br>(before deductions and exclusions) |
|---|--|---|--|
|   | <input checked="" type="checkbox"/> Wages, commissions, bonuses, tips<br><input type="checkbox"/> Operating a business | <input type="checkbox"/> Wages, commissions, bonuses, tips<br><input type="checkbox"/> Operating a business | \$3,900.00   |

|   | <b>Debtor 1</b><br><b>Sources of income</b><br>Check all that apply.   | <b>Gross income</b><br>(before deductions and exclusions) | <b>Debtor 2</b><br><b>Sources of income</b><br>Check all that apply.  | <b>Gross income</b><br>(before deductions and exclusions) |
|---|--|---|---|---|
| <b>For last calendar year:</b><br><b>(January 1 to December 31, 2016 )</b>            | <input checked="" type="checkbox"/> Wages, commissions, bonuses, tips<br><input type="checkbox"/> Operating a business | <b>\$104,000.00</b>                                       | <input type="checkbox"/> Wages, commissions, bonuses, tips<br><input type="checkbox"/> Operating a business |   |
| <b>For the calendar year before that:</b><br><b>(January 1 to December 31, 2015 )</b> | <input checked="" type="checkbox"/> Wages, commissions, bonuses, tips<br><input type="checkbox"/> Operating a business | <b>\$90,000.00</b>  | <input type="checkbox"/> Wages, commissions, bonuses, tips<br><input type="checkbox"/> Operating a business |   |

**5. Did you receive any other income during this year or the two previous calendar years?**

Include income regardless of whether that income is taxable. Examples of *other income* are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

- No
- Yes. Fill in the details.

| <b>Debtor 1</b><br><b>Sources of income</b><br>Describe below. | <b>Gross income from each source</b><br>(before deductions and exclusions) | <b>Debtor 2</b><br><b>Sources of income</b><br>Describe below. | <b>Gross income</b><br>(before deductions and exclusions) |
|--|--|--|---|
|  |  |  |   |

**Part 3: List Certain Payments You Made Before You Filed for Bankruptcy****6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?**

- No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more?

- No. Go to line 7.
- Yes. List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

\* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

- Yes. **Debtor 1 or Debtor 2 or both have primarily consumer debts.**

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

- No. Go to line 7.
- Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

| Creditor's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Was this payment for ... |
|-----------------------------|------------------|-------------------|----------------------|--------------------------|
|                             |                  |                   |                      |                          |

**7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?**

Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

 No Yes. List all payments to an insider.

| Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment |
|----------------------------|------------------|-------------------|----------------------|-------------------------|
|----------------------------|------------------|-------------------|----------------------|-------------------------|

**8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?**

Include payments on debts guaranteed or cosigned by an insider.

 No Yes. List all payments to an insider.

| Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment<br>Include creditor's name |
|----------------------------|------------------|-------------------|----------------------|--|
|----------------------------|------------------|-------------------|----------------------|--|

**Part 4: Identify Legal Actions, Repossessions, and Foreclosures****9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?**

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

 No Yes. Fill in the details.

| Case title<br>Case number   | Nature of the case             | Court or agency  | Status of the case  |
|---|--------------------------------|--|---|
| Springleaf Financial Services of Ohio Inc.<br>vs. Garett W. Eackelbary<br>2005CVF006145 | Collection of Debt/Garnishment | Akron Municipal Court<br>217 S. High St.<br>#887<br>Akron, OH 44308                  | <input checked="" type="checkbox"/> Pending<br><input type="checkbox"/> On appeal<br><input type="checkbox"/> Concluded |
| HSBC BANK USA NA vs. Garett W. Eackelbary<br>2015CV01879                                | Foereclosure                   | Stark County Court of Common Pleas<br>101 West Tuscarawas Street<br>Canton, OH 44702 | <input checked="" type="checkbox"/> Pending<br><input type="checkbox"/> On appeal<br><input type="checkbox"/> Concluded |
| Asset Acceptance LLC vs. Garett W. Eackelbary<br>2007CVF04635                           | Collection of Debt             | Akron Municipal Court<br>217 S. High St.<br>#887<br>Akron, OH 44308                  | <input checked="" type="checkbox"/> Pending<br><input type="checkbox"/> On appeal<br><input type="checkbox"/> Concluded |

**10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below.** No. Go to line 11. Yes. Fill in the information below.

| Creditor Name and Address   | Describe the Property<br>Explain what happened  | Date             | Value of the property |
|---|---|------------------|-----------------------|
| Springleaf Financial Services<br>c/o Erin Enderle Esq.<br>810 Sycamore Street Third Floor<br>Cincinnati, OH 45202 | Wage Garnishment<br><input type="checkbox"/> Property was repossessed.<br><input type="checkbox"/> Property was foreclosed.<br><input checked="" type="checkbox"/> Property was garnished.<br><input type="checkbox"/> Property was attached, seized or levied. | June August 2016 | \$2,100.00            |

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

No  
 Yes. Fill in the details.

| Creditor Name and Address | Describe the action the creditor took | Date action was taken | Amount |
|---------------------------|---------------------------------------|-----------------------|--------|
|---------------------------|---------------------------------------|-----------------------|--------|

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

No  
 Yes

#### Part 5: List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

No  
 Yes. Fill in the details for each gift.

| Gifts with a total value of more than \$600 per person | Describe the gifts | Dates you gave the gifts | Value |
|--|--------------------|--------------------------|-------|
| Person to Whom You Gave the Gift and Address:          |                    |                          |       |

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

No  
 Yes. Fill in the details for each gift or contribution.

| Gifts or contributions to charities that total more than \$600 | Charity's Name | Address (Number, Street, City, State and ZIP Code) | Describe what you contributed | Dates you contributed | Value |
|--|----------------|--|-------------------------------|-----------------------|-------|
|--|----------------|--|-------------------------------|-----------------------|-------|

#### Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

No  
 Yes. Fill in the details.

| Describe the property you lost and how the loss occurred | Describe any insurance coverage for the loss  | Date of your loss | Value of property lost |
|--|---|-------------------|------------------------|
|  | Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. |                   |                        |

#### Part 7: List Certain Payments or Transfers

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

No  
 Yes. Fill in the details.

| Person Who Was Paid<br>Address<br>Email or website address<br>Person Who Made the Payment, if Not You    | Description and value of any property transferred | Date payment or transfer was made | Amount of payment |
|--|---|-----------------------------------|-------------------|
| Charles W. Fonda, Esq.<br>Volks Anwalt<br>75 Public Square #650<br>Cleveland, OH 44113<br>cwaltf@aol.com | \$800.00 fee for representation.                  | August 2016                       | \$800.00          |

| Person Who Was Paid<br>Address<br>Email or website address<br>Person Who Made the Payment, if Not You | Description and value of any property transferred | Date payment or transfer was made | Amount of payment |
|---|---|-----------------------------------|-------------------|
| Jaafar Law Group, PLLC<br>6100 Oak Tree Blvd., Suite 200<br>Independence, OH 44131                    | \$625.00 00 Attorney Fee<br>\$41.00 Due Diliegnce | July, 2017                        | \$625.00          |

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?  
Do not include any payment or transfer that you listed on line 16.

No  
 Yes. Fill in the details.

| Person Who Was Paid<br>Address | Description and value of any property transferred | Date payment or transfer was made | Amount of payment |
|--------------------------------|---|-----------------------------------|-------------------|
|--------------------------------|---|-----------------------------------|-------------------|

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

No  
 Yes. Fill in the details.

| Person Who Received Transfer<br>Address | Description and value of property transferred | Describe any property or payments received or debts paid in exchange | Date transfer was made |
|---|---|--|------------------------|
| Person's relationship to you            |   |  |                        |

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)

No  
 Yes. Fill in the details.

| Name of trust | Description and value of the property transferred | Date Transfer was made |
|---------------|---|------------------------|
|---------------|---|------------------------|

#### **Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units**

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

No  
 Yes. Fill in the details.

| Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) | Last 4 digits of account number | Type of account or instrument | Date account was closed, sold, moved, or transferred | Last balance before closing or transfer |
|--|---------------------------------|-------------------------------|--|---|
|--|---------------------------------|-------------------------------|--|---|

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

No  
 Yes. Fill in the details.

| Name of Financial Institution<br>Address (Number, Street, City, State and ZIP Code) | Who else had access to it?<br>Address (Number, Street, City, State and ZIP Code) | Describe the contents | Do you still have it? |
|---|--|-----------------------|-----------------------|
|---|--|-----------------------|-----------------------|

**22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?**

No  
 Yes. Fill in the details.

Name of Storage Facility  
 Address (Number, Street, City, State and ZIP Code)

Who else has or had access to it?  
 Address (Number, Street, City, State and ZIP Code)

Describe the contents

Do you still have it?

**Part 9: Identify Property You Hold or Control for Someone Else**

**23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.**

No  
 Yes. Fill in the details.

Owner's Name  
 Address (Number, Street, City, State and ZIP Code)

Where is the property?  
 (Number, Street, City, State and ZIP Code)

Describe the property

Value

**Part 10: Give Details About Environmental Information**

For the purpose of Part 10, the following definitions apply:

- Environmental law** means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site** means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material** means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

**24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?**

No  
 Yes. Fill in the details.

Name of site  
 Address (Number, Street, City, State and ZIP Code)

Governmental unit  
 Address (Number, Street, City, State and ZIP Code)

Environmental law, if you know it

Date of notice

**25. Have you notified any governmental unit of any release of hazardous material?**

No  
 Yes. Fill in the details.

Name of site  
 Address (Number, Street, City, State and ZIP Code)

Governmental unit  
 Address (Number, Street, City, State and ZIP Code)

Environmental law, if you know it

Date of notice

**26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.**

No  
 Yes. Fill in the details.

Case Title  
 Case Number

Court or agency  
 Name  
 Address (Number, Street, City, State and ZIP Code)

Nature of the case

Status of the case

**Part 11: Give Details About Your Business or Connections to Any Business**

**27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?**

A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time  
 A member of a limited liability company (LLC) or limited liability partnership (LLP)

A partner in a partnership  
 An officer, director, or managing executive of a corporation  
 An owner of at least 5% of the voting or equity securities of a corporation  
 No. None of the above applies. Go to Part 12.

Yes. Check all that apply above and fill in the details below for each business.

Business Name  
Address  
(Number, Street, City, State and ZIP Code)

Describe the nature of the business

Name of accountant or bookkeeper

Employer Identification number  
Do not include Social Security number or ITIN.

Dates business existed

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

No  
 Yes. Fill in the details below.

Name  
Address  
(Number, Street, City, State and ZIP Code)

Date Issued

**Part 12: Sign Below**

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.  
18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Garett W. Eackelbary

Garett W. Eackelbary  
Signature of Debtor 1

Signature of Debtor 2

Date August 7, 2017

Date \_\_\_\_\_

Did you attach additional pages to *Your Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?

No  
 Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

No  
 Yes. Name of Person \_\_\_\_\_. Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Fill in this information to identify your case:

|   |                             |
|---|-----------------------------|
| Debtor 1                                | <b>Garett W. Eackelbary</b> |
| Debtor 2<br>(Spouse, if filing)         |                             |
| United States Bankruptcy Court for the: | Northern District of Ohio   |
| Case number<br>(if known)               | 17-61538                    |

Check as directed in lines 17 and 21:

According to the calculations required by this Statement:

1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).

2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).

3. The commitment period is 3 years.

4. The commitment period is 5 years.

Check if this is an amended filing

## Official Form 122C-1

### Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

#### Part 1: Calculate Your Average Monthly Income

1. What is your marital and filing status? Check one only.

Not married. Fill out Column A, lines 2-11.

Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

|  | Column A<br>Debtor 1 | Column B<br>Debtor 2 or<br>non-filing spouse |
|--|----------------------|--|
| 2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).   | \$ <u>6,642.46</u>   | \$ <u>0.00</u>                               |
| 3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.   | \$ <u>0.00</u>       | \$ <u>0.00</u>                               |
| 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3. | \$ <u>0.00</u>       | \$ <u>0.00</u>                               |
| 5. Net income from operating a business, profession, or farm   | Debtor 1             |  |
| Gross receipts (before all deductions)   | \$ <u>0.00</u>       |  |
| Ordinary and necessary operating expenses  | -\$ <u>0.00</u>      |  |
| Net monthly income from a business, profession, or farm  | \$ <u>0.00</u>       | Copy here -> \$ <u>0.00</u>                  |
| 6. Net income from rental and other real property  | Debtor 1             |  |
| Gross receipts (before all deductions)   | \$ <u>0.00</u>       |  |
| Ordinary and necessary operating expenses  | -\$ <u>0.00</u>      |  |
| Net monthly income from rental or other real property  | \$ <u>0.00</u>       | Copy here -> \$ <u>0.00</u>                  |

## 7. Interest, dividends, and royalties

## 8. Unemployment compensation

Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:

For you ..... \$ **0.00**  
 For your spouse ..... \$ **0.00**

## 9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act.

## 10. Income from all other sources not listed above. Specify the source and amount.

Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below.

\$ **0.00** \$ **0.00**

\$ **0.00** \$ **0.00**  
 + \$ **0.00** \$ **0.00**

Total amounts from separate pages, if any.

## 11. Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.

|                    |                  |                      |
|--------------------|------------------|----------------------|
| \$ <b>6,642.46</b> | + \$ <b>0.00</b> | = \$ <b>6,642.46</b> |
|--------------------|------------------|----------------------|

Total average monthly income

**Part 2: Determine How to Measure Your Deductions from Income**12. Copy your total average monthly income from line 11. \$ **6,642.46**

## 13. Calculate the marital adjustment. Check one:

You are not married. Fill in 0 below.  
 You are married and your spouse is filing with you. Fill in 0 below.  
 You are married and your spouse is not filing with you.

Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents.

Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page.

If this adjustment does not apply, enter 0 below.

..... \$ .....  
 ..... \$ .....  
 +\$ .....  
 Total ..... \$ **0.00** Copy here=> - **0.00**

14. Your current monthly income. Subtract line 13 from line 12. \$ **6,642.46**

## 15. Calculate your current monthly income for the year. Follow these steps:

15a. Copy line 14 here=> \$ **6,642.46**

Multiply line 15a by 12 (the number of months in a year).

x 12

15b. The result is your current monthly income for the year for this part of the form. \$ **79,709.52**

**16. Calculate the median family income that applies to you. Follow these steps:**16a. Fill in the state in which you live. **OH**16b. Fill in the number of people in your household. **4**16c. Fill in the median family income for your state and size of household. **\$ 83,040.00**

To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

**17. How do the lines compare?**

17a.  Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, *Disposable income is not determined under 11 U.S.C. § 1325(b)(3)*. Go to Part 3. Do NOT fill out *Calculation of Your Disposable Income* (Official Form 122C-2).

17b.  Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, *Disposable income is determined under 11 U.S.C. § 1325(b)(3)*. Go to Part 3 and fill out *Calculation of Your Disposable Income* (Official Form 122C-2). On line 39 of that form, copy your current monthly income from line 14 above.

**Part 3: Calculate Your Commitment Period Under 11 U.S.C. § 1325(b)(4)**18. Copy your total average monthly income from line 11. **\$ 6,642.46**

19. Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13.

19a. If the marital adjustment does not apply, fill in 0 on line 19a. **-\$ 0.00**19b. Subtract line 19a from line 18. **\$ 6,642.46**

## 20. Calculate your current monthly income for the year. Follow these steps:

20a. Copy line 19b. **\$ 6,642.46**Multiply by 12 (the number of months in a year). **x 12**20b. The result is your current monthly income for the year for this part of the form **\$ 79,709.52**20c. Copy the median family income for your state and size of household from line 16c. **\$ 83,040.00****21. How do the lines compare?**

Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, *The commitment period is 3 years*. Go to Part 4.

Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, *The commitment period is 5 years*. Go to Part 4.

**Part 4: Sign Below**

By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct.

**X /s/ Garett W. Eackelbary****Garett W. Eackelbary**

Signature of Debtor 1

Date **August 7, 2017**

MM / DD / YYYY

If you checked 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

**Current Monthly Income Details for the Debtor****Debtor Income Details:**Income for the Period **01/01/2017** to **06/30/2017**.**Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions**Source of Income: **Wages**

Income by Month:

|                    |                |                    |
|--------------------|----------------|--------------------|
| 6 Months Ago:      | <b>01/2017</b> | <b>\$14,854.78</b> |
| 5 Months Ago:      | <b>02/2017</b> | <b>\$3,500.00</b>  |
| 4 Months Ago:      | <b>03/2017</b> | <b>\$0.00</b>      |
| 3 Months Ago:      | <b>04/2017</b> | <b>\$0.00</b>      |
| 2 Months Ago:      | <b>05/2017</b> | <b>\$10,750.00</b> |
| Last Month:        | <b>06/2017</b> | <b>\$10,750.00</b> |
| Average per month: |                | <b>\$6,642.46</b>  |

**United States Bankruptcy Court**  
**Northern District of Ohio**

In re **Garett W. Eackelbary**

Debtor(s)

Case No. **17-61538**  
Chapter **13****DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S) - AMENDED**

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

|   |                  |
|---|------------------|
| For legal services, I have agreed to accept .....           | \$ <b>625.00</b> |
| Prior to the filing of this statement I have received ..... | \$ <b>625.00</b> |
| Balance Due .....   | \$ <b>0.00</b>   |

2. The source of the compensation paid to me was:

Debtor       Other (specify):

3. The source of compensation to be paid to me is:

Debtor       Other (specify):

4.  I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- d. [Other provisions as needed]

6. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

**1. Any work performed in a Chapter 13 in which attorney opts, at his discretion, to bill at an hourly rate, said case was dismissed pre-confirmation or any work performed post-confirmation. Attorney fees shall be \$200.00 per hour for all other post-confirmation work and any pre-confirmation work should the case be dismissed. Attorney fees shall be \$200.00 per hour for any pre-confirmation work undertaken by Jaafar and Mahdi Law Group, P.C. to be billed hourly rather than in the flat fee fashion.**

**2. Debtor agrees to reimburse attorney for all costs including postage, copying, and filing fees.**

**3. Debtor agrees to cooperate with requests of the Trustee for production of documents and has been advised that failure to comply with Trustee may result in the dismissal of the Chapter 13 case.**

**4. Attorney, at his discretion, will generally take the flat fee that is allowed under the Local Bankruptcy Rules, however, in the event that the this fee is not sufficient to cover all of attorney's fees, attorney may, at his sole discretion, elect to bill this case at an hourly rate of \$200.00 per hour for attorney time and \$ 100.00 per hour for paralegal time, by submitting an Application for Fees detailing the time spent and work expended and serve the same upon the Debtor, Trustee and any interested party.**

**5. For all time spent in the case by special counsel for any special appearances the cost will be \$150 per hour or the actual cost of the attorney hired, whichever attorney decides.**

**6. For all phone calls or any work performed, Attorney will bill a minimum of .1 hrs regardless of the actual time. For each additional 6 minute increment of time spent, .1 will be added to the time for billing.**

**DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S) - AMENDED**  
(Continuation Sheet)

**CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

August 7, 2017  
*Date*

/s/ Charles W. Fonda  
**Charles W. Fonda 0022753**  
*Signature of Attorney*  
**Jaafar Law Group PLLC**  
**6100 Oak Tree Blvd, Suite 200**  
**Independence, OH 44131**  
**888-324-7329**  
*Name of law firm*

**United States Bankruptcy Court  
Northern District of Ohio**

In re Garett W. Eackelbary \_\_\_\_\_ Case No. 17-61538  
Debtor(s) \_\_\_\_\_ Chapter 13 \_\_\_\_\_

**VERIFICATION OF CREDITOR MATRIX - AMENDED**

The above-named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.

Date: August 7, 2017

/s/ Garett W. Eackelbary  
Garett W. Eackelbary  
Signature of Debtor

Afni, Inc.  
Po Box 3097  
Bloomington, IL 61702

American General Finance Inc.  
601 NW 2nd Street  
Evansville, IN 47708

Capital One  
15000 Capital One Dr  
Richmond, VA 23238

Capital One Bank  
P.O.Box 30253  
Salt Lake City, UT 84130

Capital One Bank  
P.O. Box 62180  
Salt Lake City, UT 84130

Chrysler Financial  
P.O. Box 9001921  
Louisville, KY 40290

Credit Collections SVC  
P.O. Box 773  
Needham Heights, MA 02494

ERC/Enhanced Recovery  
8014 Bayberry Road  
Jacksonville, FL 32256

Erin Enderle, Esq.  
810 Sycamore Street, 3rd Floor  
Cincinnati, OH 45202

Fidelity Properties In  
220 E Main St  
Alliance, OH 44601

First Federal Credit & collections  
24700 Chagrin Blvd.,  
Suite 205  
Cleveland, OH 00004-4122

First Premier  
601 Minneapolis Ave.  
Sioux Falls, SD 57104

LVNV Funding, LLC  
625 Pilot Rd.  
Ste. 3  
Las Vegas, NV 89119-4485

Michael D. Millerl  
5045 Hollyhock Ave.  
Canton, OH 44718

National Credit Systems  
117 E. 24th Street  
New York, NY 10010

Scott Hendricks, DDS  
C/o Robert McNamara, Esq.  
McNamara Demczyk Co., LPA  
1370 Cleveland Ave.  
Uniontown, OH 44685

Team Recovery  
3928 Clock Pointe Trail  
Stow, OH 44224

United States of America  
US Attorney Northern Division of Oh  
801 West Superior Ave  
Suite #400  
Cleveland, OH 44113

Wells Fargo Hm Mortgag  
8480 Stagecoach Cir  
Frederick, MD 21701

West Asset  
2703 N. Highway 75  
Sherman, TX 75090